



PDS

EQUINE SUBMISSION FORM

PDS Lab # _____

Invoice to Clinic:	Owner/Farm Name:
Address:	Animal Location:
Postal Code:	Animal ID:
Phone:	Species: EQUINE Breed:
Veterinarian: <small>Print name</small>	Sex: <input type="checkbox"/> Male <input type="checkbox"/> MN <input type="checkbox"/> Female Age: _____
Fax:	
Email:	
Copy to:	

STAT (fees apply) **Rabies Suspect** **Legal Case** **Insurance Case** **Date Collected:** _____

Reason For Submission

Diagnostic
 Research
 Surveillance
 Routine Monitoring

Samples	Sent	Received <small>office use only</small>
On cells		
EDTA		
Heparin		
Serum		
Fluid		
Slides		
Urine		
Feces		
Swab		
Fixed Tissues		
Fresh Tissues		
Paraffin Block		
Whole Animal		
Other _____		

HISTORY: (including vaccination history, treatments etc) **Special Project Name (if applicable):** _____

Previous Submission #: _____ Submitters Signature: _____

Herd Size: _____
 No. sick: _____
 No. dead: _____
 New disease, duration: _____
 Ongoing disease, duration: _____
 Non disease: _____

Chemistry Panels

Standard Kidney
 Presurgical Liver

Chemistry

Single Chemistry: _____
 Bile Acid

Bacteriology/Mycology

Specimen & Site: _____

Routine Culture and Sensitivity
 Clostridium perfringens/difficile
 Salmonella sp.
 Fungal Culture
 Other _____

Toxicology

Mineral Panel:
 #1 #2 #3 #4
 Single element _____
 Vitamin A
 Vitamin E
 Vitamin A and E

★★NATIONAL SURVEILLANCE★★
 Please complete this section
★★Production Stage★★

Fetus
 Neonate
 Nursing
 Weaned
 Juvenile
 Adult

★★ Primary Systems Affected ★★

Abortion/Stillbirth
 Cardiovascular
 Gastrointestinal
 Integument (skin)
 Mammary
 Musculoskeletal
 Neurological
 Reproductive
 Respiratory
 Sudden/Unexplained Death
 Unthriftiness/Anorexia/Poor Production
 Urinary
 Whole body/Multisystem
 Non disease
 Other

Hematology

CBC
 Other _____

Coagulation

PT PTT FDP

Parasitology

Routine Flotation Fecal Egg Count
 Other _____

Immunology

IHC for infectious agent or cellular marker _____
 Coombs
 Immunoglobulin Quantification (IgG)

Virology

Equine Herpesvirus 1 – FAT
 EM for _____
 Other _____

Referred Out Tests

Equine Protozoal Myelitis (Western Blot) or IFA
 HYPP
 Potomac Fever
 Strep. equi (Strangles) – Antibody
 Other _____

Endocrine

Progesterone Testosterone
 T4 Cortisol
 Dex suppression test Pre Post

Cytology

Fluid(s) Smear(s)
 Other _____

* See page 2 for diagrams and list of sites

PCR

Equine Herpesvirus 1 & 4
 subtyping
 Equine Influenza
 genotyping
 Equine Respiratory Panel
 Streptococcus equi
 Other _____

Pathology/Necropsy

*Dermatopathology
 *Surgical Biopsy
 **Complete Necropsy
 Private Cremation (fill out Release of remains form)
 **Histology

Urine

Freeflow Cystocentesis
 Catheterized Unknown
 Urinalysis Culture
 Other _____

Serology

Equine Infectious Anemia (EIA)
Must be accompanied by CFIA forms
 West Nile Virus (equine IgM) ELISA
 Equine Herpesvirus 1 & 4 –ELISA
 Equine Influenza – Antibody test
 H7N7 (A1) H3N8 (A2)
 Equine Arteritis virus (EVA) - VN

Pathology/Necropsy

*Dermatopathology
 *Surgical Biopsy
 **Complete Necropsy
 Private Cremation (fill out Release of remains form)
 **Histology

*** Fill out page 2 – Surgical biopsy/dermatopathology form ***
****Fill out page 3 – Necropsy Form with page****



Prairie Diagnostic Services Inc.
 52 Campus Drive
 Saskatoon, SK, S7N 5B4
 TEL: (306) 966-7316
 FAX: (306) 966-2488
 www.pdsinc.ca

Date/Time (RECEIVED) _____

PDS

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SURGICAL BIOPSY/DERMATOPATHOLOGY SUBMISSION

(Please fill out Page 1 and submit along with this form.)

Clinic: _____	Owner Name: _____
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Surgical Biopsy

On diagram below shade areas and mark "X" as biopsy sites

Samples submitted:

of formalized tissue biopsies _____ Description _____

of fresh tissues biopsies _____ Description _____

of cytology specimens _____ List sites: 1) _____
 2) _____
 3) _____
 4) _____

Dermatopathology Submissions

On diagram below shade areas and mark "X" as biopsy sites

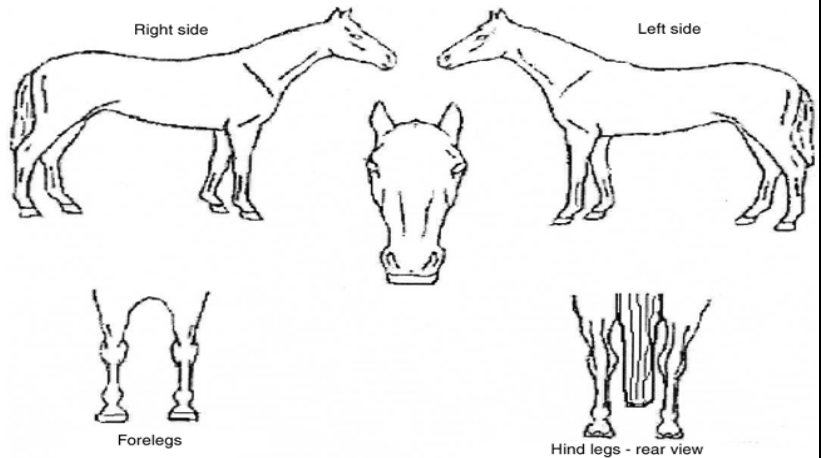
Circle lesion type

Primary

- bullae
- macule
- nodule
- papule
- patch
- plaque
- tumor
- vesicle
- wheal

Secondary

- abscess
- alopecia
- callus
- collarette
- comedone
- crust
- cyst
- erythema
- erosion
- excoriation
- fissure
- hyperkeratosis
- hyperpigmentation
- hyperpigmentation
- hypopigmentation
- scale
- scar
- ulcer



Duration of problem _____ Animal is pruritic YES _____ NO _____ Don't know _____

Pertinent History _____

Other test results _____

Treatments _____

Response _____

Tentative Diagnosis _____

Immunohistochemistry: YES _____ NO _____ Call First _____

